See attached form for additional information Interagency Report Control No.:

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE 1. CERTIFICATE NUMBER: 41-R-0003

CUSTOMER NUMBER: 559

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

Health Partners Research Foundation 640 Jackson Street

St Paul, MN 55101

Telephone: (612) 221-2928-

651-254-3391

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Atached Listing

| REPORT OF ANIMALS                                     | REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A ) |   |  |   |   |  |  |
|---|---|---|--|---|---|--|--|
| A.  Animals Covered By The Animal Welfare Regulations | B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not ye  | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to | F.  TOTAL NUMBER OF ANIMALS  ( COLUMNS C + D + E) |  |  |
| 4. Dogs   | Q   | 0   |  |   | 0   |  |  |
| 5. Cats   | 0   | 0   |  |   | 0   |  |  |
| 6. Guinea Pigs  | 0   | 0   |  |   | 0   |  |  |
| 7. Hamsters   | 0   | 0   |  |   | 0   |  |  |
| 8. Rabbits  | 0   | 52  |  |   | 52  |  |  |
| 9. Non-human Primate                                  | 0   | 0   |  |   | 0   |  |  |
| 10. Sheep   | 0   | 45  |  |   | 45  |  |  |
| 11. Pigs  | 0   | 92  |  |   | 92  |  |  |
| 12. Other Farm Animals                                | 0   | 0   |  |   | 0   |  |  |
|   |   |   |  |   |   |  |  |
| 13. Other Animals                                     | 0   | 0   |  |   | 0   |  |  |
|   |   |   |  |   |   |  |  |
|   |   |   |  | ·   | \$  |  |  |
|   |   |   |  |   |   |  |  |

#### **ASSURANCE STATEMENTS**

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and

|   | N BY HEADQUARTERS RESEARCH FACILITY OFFICIAL ve Officer or Legally Responsible Institutional Official) |             |
|---|--|-------------|
| SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print<br>Andrew Nelson, MPH - Exec. DIRECTOR | DATE SIGNED |

APHIS FORM 7023 ( AUG 91 )

1. CERTIFICATE NUMBER: 41-R-0007

CUSTOMER NUMBER: 591

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

Minneapolis Medical Research Found.,Inc.

Grants/Contracts 914 South Eight Street 3rd And 10th Floor Minneapolis, MN 55404

Telephone: (612) -347-5098

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

D-10 Surgical Facility

FACILITY LOCATIONS (Sites) - See Atached Listing

| A.  Animals Covered By The Animal Welfare Regulations | B. Number of animals being _ bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not y∈ | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to | F.  TOTAL NUMBER OF ANIMALS  ( COLUMNS C + D + E ) |
|---|--|---|--|---|--|
| 4. Dogs   | 0  | 0   | 8  |   | 8  |
| 5. Cats   | 0  | 0   | 29   |   | 29   |
| 6. Guinea Pigs  | 0  | 0   | 0  | ·   | 0  |
| 7. Hamsters   | 0  | 0   | 0  |   | 0  |
| 8. Rabbits  | 2  | 0   | 92   |   | 92   |
| 9. Non-human Primate                                  | 0  | 0   | 0  |   | 0  |
| 0. Sheep  | 2  | 0   | 114  |   | 114  |
| 1. Pigs   | 0  | 1   | 42   |   | 43   |
| 2. Other Farm Animals                                 | 0  | 0   | 0  |   | 0  |
| 3. Other Animals                                      | 0  | 0   | 0  |   | 0  |
|   |  |   |  |   |  |

#### ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL (Chief Executive Officer or Legally Responsible Institutional Official)

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print

Mary E. Bergaas, Chief Operations Officer

DATE SIGNED

I. REGISTRATION NO. 41- R-0011

560

FORM APPROVED OMB NO. 0579-0036

#### ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)

2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA DAVID LYNDGAARD ST. JOHN'S UNIVERSITY COLLEGEVILLE, MN 56321

2. REPORTING FACILITY (List all locations where premain were housed or used in actual research, leating, teaching, or experimentation, or held for these purposes. Attach additional ments if necessary.) FACILITY LOCATIONS (Silve)

PETER ENGEL HALL SJUL COLLEGEVILLE, MN 56321 REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Albedy exhibitional shoets if necessary or use APPRS FORM 7023A.) Number of S. Number of premals upon ents, research, surgery or tests were animals being animaly upon which leaching, which experiments. conducted involving accompanying pain or distress to the animals and for which the use of appropriate Animals Covered leaching, research, By The Animal Welfare Regulations ditioned. or research, experiments, or YOTAL NO. surgery, or tests were conducted invulving accompanying pain or held for use in withetic, analgesic, or tranquilizing drugs would OF ANIMALS have adversely effected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or leafs. (An explanation of teaching, testing, experiments, lasts were conducted distress to the animals and for which appropriate involving no pain, distress, or (Cols. C + D + E) research, or surgery but not anosthelis, analgosis, or tranquilizing drugs were the procedures producing pain or distress in these animals and the reasons such drugs were not used yet used for such purposess. use of pain-relieving drugs. must be attached to this report). 4. Dogs 5. Cats 6. Guinea Pigs 7. Hamsters 8. Rabbits 9. Non-human Primates 10. Sheep 11. Pigs 12. Other Farm Animals 13. Other Animals

- Protessionally acceptable standards governing the care, treatment, and use of enimals, including approriate use of enesthetic, analgesis, and tranquilizing drugs, prior to, durting, and fallowing actual research teaching, teating, surgery, or experimentation were tollowed by this research facility.
- 2). Each principal investigator has considered attenuatives to comitst procedures
- 2). This facility is editoring to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of unimple effected.
- 4). The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

| (Chief Executive Officer                      | DQUARTES RESEARCH FACILITY OFFICIAL or Legally Responsible Institutional Official) tries narred, and complete (7 USC Section 2143). |             |
|---|---|-------------|
| SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (TYPE OF FILL)  DAVID LYND C. ATTRD  | DATE SIGNED |
| I swin ly from                                | GRECTOR, ACADEMIC BUDGETA PLANNING  | 12/30/02    |

APHIS FORM 7023 (AUG 91)

**ASSURANCE STATEMENTS** 

919 716 5696

P.02/04

additional information

See attached form for

Interagency Report Control N

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

This poport is required by law (7 USC 2143). Failure to report according to the regulations

1. CERTIFICATE NUMBER: 41-R-0015 CUSTOMER NUMBER: 558

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

Medtronic Inc Physiological Research Laboratories 1385 115th Ave Nw Minneapolis, MN 55448

Telephone: (763) -514-6800

DEC 12 2002

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, lesting, or experimentation, or held for these purposes. Attach additional sheets if necessary )

#### FACILITY LOCATIONS (Sites) - See Alached Listing

| Animals Covered By The Animal Weitare Regulations | B. Number of shired, — conditioned, or held for use in teaching, testing, experiments, research, or surgery but not ye | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | D. Number of enistrals upon which experiments, leaching, research, surgery, or least were conducted involving accompanying pain or distress to the enimels and for which appropriate enesthetic, a | E. Number of animats upon which teaching.  experiments, research, surpery or tests were  conducted involving accompanying pain or distress to the animats and for which the use of appropriate enesthetic, analogsic, or tranquilizing drugs would have adversely effected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these entimats and the reasons such drugs were not used must be attached to | F.  TOTAL NUMBER OF ANIMALS  ( COLUMNS C+D+E) |
|---|--|---|--|--|---|
| 4. Dogs   | 42   |   | 252  |  | 252   |
| 6. Cats   | 0  |   |  |  | 0   |
| 8. Guinea Pigs                                    | 1  |   | 7  |  | 7   |
| 7. Hamsters                                       | 0  |   |  |  | 0   |
| 8. Rabbits  | 15   |   | 301  |  | 301   |
| 9. Non-human Primate                              | 0  |   |  |  | 0   |
| 10. Sheep   | 15   |   | 81   |  | 81  |
| l1. Pigs  | 5  |   | 206  |  | 206   |
| 12. Other Farm Animals                            | 0  |   |  |  | 0   |
| Goats   |  |   | 2  |  | 2   |
| 3. Other Animals                                  |  |   |  |  |   |
|   |  |   |  |  |   |
|   |  |   |  |  |   |
|   |  |   |  |  |   |

#### **ASSURANCE STATEMENTS**

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anisastic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is achieving to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal invarigator and approved by the institutional Animal Cure and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report, in addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals effected.
- 4) The attending velerinarian for this research facility has appropriate authority to ensure the provision of adequate velerinary care and to oversee the adequacy of other expects of animal care and

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL (Chief Executive Officer or Legally Responsible Institutional Official)

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print

DATE SIGNED 12-11-04

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

John W. Hammargren

APHIS FORM 7023

(Replaces VS FORM 18-23 (OCT 88), which is obsolete.

(AUG 91)

1. CERTIFICATE NUMBER: 41-R-0022

CUSTOMER NUMBER: 552

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)

**Guidant Corporation** Cardiac Pacemakers, Inc. 4133 Fernwood Ave Arden Hills, MN 55112

Telephone: (651) -582-4501

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Atached Listing

River Valley Farms, INC.

| A.  Animals Covered By The Animal Welfare Regulations | B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not ye | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to | F.  TOTAL NUMBER OF ANIMALS  ( COLUMNS C + D + E ) |
|---|--|---|--|---|--|
| 4. Doys   | 27   |   | 143  |   | 170  |
| 5. Cats   |  |   |  |   |  |
| 6. Guinea Pigs  |  |   |  |   |  |
| 7. Hamsters   |  |   |  |   |  |
| 8. Rabbits  |  |   |  |   |  |
| 9. Non-human Primate                                  |  |   |  |   |  |
| 10. Sheep   | 3  |   | 53   |   | 56   |
| 11. Pigs  | 3  |   | 80   |   | 83   |
| 12. Other Farm Animals                                |  |   |  |   |  |
| 3. Other Animals                                      |  |   |  |   |  |
|   |  |   |  |   | 5  |
|   |  |   |  |   |  |
|   |  |   |  |   | 1  |

#### ASSURANCE STATEMENTS

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- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and

| CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL ( Chief Executive Officer or Legally Responsible Institutional Official ) |   |  |  |  |
|--|---|--|--|--|
| <u> </u>   |   |  |  |  |
| SIGNATUREDE C.E.O. OR INSTITUTIONAL OFFICIAL   | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print |  |  |  |

DATE SIGNED

(Replaces VS FORM 18-23 (OCT 88), which is obsolete. AUG 91 )

ynn Elliitt UP Research & Technology

1. CERTIFICATE NUMBER: 41-R-0028

CUSTOMER NUMBER: 590

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY
(TYPE OR PRINT)

Medical Institute Of Minnesota 5503 Green Valley Drive Bloomington, MN 55437

Telephone: (952) -844-0064

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

#### FACILITY LOCATIONS (Sites) - See Atached Listing

| REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A ) |  |   |  |   |   |
|---|--|---|--|---|---|
| A.  Animals Covered By The Animal Welfare Regulations   | B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not ye | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to | F.  TOTAL NUMBER OF ANIMALS  ( COLUMNS C + D + E) |
| 4. Dogs   |  |   | 91   |   | 91  |
| 5. Cats   |  |   | 36   |   | 36  |
| 6. Guinea Pigs  |  | 6   |  |   | 6   |
| 7. Hamsters   |  | 0   |  |   | 0   |
| 8. Rabbits  |  |   | 6  |   | b   |
| 9. Non-human Primate  |  | 0   |  |   | Ö   |
| 10. Sheep   |  | Ŋ   |  |   | 0   |
| 11. Pigs  |  | 0   |  |   | O   |
| 12. Other Farm Animals  |  | 0   |  |   | 0   |
|   |  |   |  |   |   |
| 13. Other Animals   |  | 0   |  | ·   | O   |
|   |  |   |  |   | ف   |
|   |  |   |  |   |   |
|   |  |   |  |   |   |

### ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and

|   | ON BY HEADQUARTERS RESEARCH FACILITY OFFICIAL autive Officer or Legally Responsible Institutional Official) |             |
|---|---|-------------|
| SIGNATURE OF C.P.O. OR INSTITUTIONAL OFFICIAL | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print) William Cowan, DVM President               | DATE SIGNED |

APHIŠ FORM 7023

This report is required by law (7 USC 2143). Failure to report according to the regulations

See attached form for additional information

nteragency Report Control No.:

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 41-R-0029

CUSTOMER NUMBER: 551

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY
(TYPE OR PRINT)

Children'S Health Care Of St. Paul Neonatal Research Laboratory 345 N. Smith Avenue Mail Stop 60138 St Paul, MN 55102

Telephone: (651) -220-6026

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

L 282 A SAME Address A FACILITY LOCATIONS (Sites) - See Atached Listing

| REPORT OF ANIMALS                                     | USED BY OR UNDER   | CONTROL OF RESEAF   | RCH FACILITY ( Attach addition:  | al sheets if necessary or use APHIS Form 7023A )  |  |
|---|--|---|--|---|--|
| A.  Animals Covered By The Animal Welfare Regulations | B. Number of animals being - bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not ye | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to | F.  TOTAL NUMBER OF ANIMALS  (COLUMNS C+D+E) |
| 4. Dogs   |  |   |  |   |  |
| 5. Cats   |  |   |  |   |  |
| 6. Guinea Pigs  |  |   |  |   |  |
| 7. Hamsters   |  |   |  |   |  |
| 8. Rabbits  |  |   |  |   |  |
| 9. Non-human Primate                                  |  |   |  |   |  |
| 10. Sheep   |  |   |  |   |  |
| 11. Pigs  | ٥  | 0   | 47   | 0   | 47   |
| 12. Other Farm Animals                                |  |   |  |   |  |
|   |  |   |  |   |  |
| 13. Other Animals                                     |  |   |  |   |  |
|   |  |   |  |   | ,*   |
|   |  |   |  |   |  |
|   |  |   |  |   |  |

#### ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL (Chief Executive Officer or Legally Responsible Institutional Official)

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL
WELSON

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print

Brock Nelson

CEO

9/30/02

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

1. CERTIFICATE NUMBER: 41-R-0042

FORM APPROVED OMB NO. 0579-0036

CUSTOMER NUMBER: 550

Ridgewater College Veterinary Technology Dept. P. O. Box 1097 Willmar, MN 56201

NOV 2 5 2002

Telephone: (612) -235-5114

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

#### FACILITY LOCATIONS (Sites) - See Atached Listing

| A.  Animals Covered By The Animal Welfare Regulations | B. Number of animals being _ bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not ye | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to | F.  TOTAL NUMBER OF ANIMALS  ( COLUMNS C + D + E ) |
|---|--|---|--|---|--|
| 4. Dogs   |  | 10  | 14   |   | 24   |
| 5. Cats   |  | 8   | 22   |   | 30   |
| 6. Guinea Pigs  |  | 3   |  |   | 3  |
| 7. Hamsters   |  | 4   |  |   | 4  |
| 8. Rabbits  |  | 5   |  |   | 5  |
| 9. Non-human Primate                                  |  |   |  |   |  |
| 10. Sheep   |  |   |  |   |  |
| 11. Pigs  |  |   |  | 10.1.2 10.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.  |  |
| 12. Other Farm Animals                                |  |   |  |   |  |
| 3. Other Animals                                      |  |   |  |   |  |
| Iguana  |  | 1   |  |   | · 1  |
|   |  |   |  |   | •  |

#### ASSURANCE STATEMENTS

- Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
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- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL ( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print

Colleen Thompson, President

APHIS FORM 7023

(Replaces VS FORM 18-23 (OQT \$8), which is obsolete.

( AUG 91 )

1. CERTIFICATE NUMBER: 41-R-0043

FORM APPROVED OMB NO. 0579-0036

CUSTOMER NUMBER: 588

Gustavus Adolphus College 800 W. College Avenue St Peter, MN 56082

Telephone: (507) -933-8000

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS (Sites) - See Atached Listing

| REPORT OF ANIMALS                                     | USED BY OR UNDER   | CONTROL OF RESEAR   | CH FACILITY ( Attach additiona   | I sheets if necessary or use APHIS Form 7023A )   |  |
|---|--|---|--|---|--|
| A.  Animals Covered By The Animal Welfare Regulations | B. Number of animals being : bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not ye | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to | F.  TOTAL NUMBER OF ANIMALS  (COLUMNS C+D+E) |
| 4. Dogs   |  |   |  |   |  |
| 5. Cats   |  |   |  | ·   |  |
| 6. Guinea Pigs  |  |   |  |   |  |
| 7. Hamsters   |  |   |  |   |  |
| 8. Rabbits  |  |   | 6  |   | 6  |
| 9. Non-human Primate                                  |  |   |  |   |  |
| 10. Sheep   |  |   |  |   |  |
| 11. Pigs  |  |   |  |   |  |
| 12. Other Farm Animals                                |  |   |  |   |  |
| 13. Other Animals                                     |  |   |  |   |  |
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#### ASSURANCE STATEMENTS

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| CIA |
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|     |

SIGNATURE OF C.E.O. OB INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print

DATE SIGNED

John Mosbo, Dean of Faculty

l .

12-4-02

APHIS FORM 7023

See reverse side for additional information.

Interagency Report Centrol No 0180-DOA-AN

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. REGISTRATION NO. 41-R-0044 CUSTOMER NO. 587

2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA.

FORM APPROVED OMB NO. 0579-0036

### ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

include Zip Code)

EMBRO CORPORATION
2460 HIGHWAY 100 SOUTH
ST LOUIS PARK, MN 55416

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, teaching, or experimentation, or held for these purposes. Attach additional sheets if necessary.)

FACILITY LOCATIONS(sites)

EMBRO CORPORATION
ST LOUIS PARK, MN 55416

| A. Animals Covered By The Animal Welfare Regulations | B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes. | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used. | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to this report) | F. TOTAL NO. OF ANIMALS (Cols. C + D + E) |
|--|---|---|---|--|---|
| 4. Dogs  |   |   |   |  |   |
| 5. Cats  |   |   |   |  |   |
| 6. Guinea Pigs                                       |   |   |   |  |   |
| 7. Hamsters  |   |   |   |  |   |
| 8. Rabbits   |   |   |   |  |   |
| 9. Non-Human Primates                                |   |   |   |  |   |
| 10. Sheep  |   |   |   |  |   |
| 11. Pigs   |   |   |   |  |   |
| 12. Other Farm Animals                               |   |   |   |  |   |
| 13. Other Animals                                    |   |   |   |  |   |
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- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

| CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL (Chief Executive Officer or Legally Responsible Institutional official) I certify that the above is true, correct, and complete (7 U.S.C. Section 2143) |  |             |  |  |
|--|--|-------------|--|--|
| SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL  | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print) | DATE SIGNED |  |  |
| Vance D. Fiegel  | Vance D. Fiegel, President/COO and I.O.                          | 12/19/2002  |  |  |

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

1. CERTIFICATE NUMBER: 41-R-0045

CUSTOMER NUMBER: 548

FORM APPROVED. (OMB NO. 0579-0936)

University Of St. Thomas 2115 Summit Avenue St Paul, MN 55105

JAN 03 2003

Telephone: (999) 999 9999

(651) 962-5220

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

#### FACILITY LOCATIONS (Sites) - See Atached Listing

| REPORT OF ANIMALS                                     | USED BY OR UNDER   | CONTROL OF RESEAR   | CH FACILITY ( Attach addition  | al sheets if necessary or use APHIS Form 7023A )  |   |
|---|--|---|--|---|---|
| A.  Animals Covered By The Animal Welfare Regulations | B. Number of animals being-bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not ye | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to | F.  TOTAL NUMBER OF ANIMALS  ( COLUMNS C + D + E) |
| 4. Dogs   |  |   |  |   |   |
| 5. Cats   |  |   |  |   |   |
| 6. Guinea Pigs  |  |   |  |   |   |
| 7. Hamsters   |  | 12000   |  |   |   |
| 8. Rabbits  |  |   |  |   |   |
| 9. Non-human Primate                                  |  |   |  |   |   |
| 10. Sheep   |  |   |  |   |   |
| 11. Pigs  |  |   |  |   |   |
| 12. Other Farm Animals                                |  |   |  |   |   |
| 13. Other Animals                                     |  |   |  |   |   |
| Gerbils   | 149  | 13  | ø  | Ø   | : 13  |
|   |  |   |  |   |   |

#### ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
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|   | TION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL ecutive Officer or Legally Responsible Institutional Official) |             |
|---|--|-------------|
| SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print  | DATE SIGNED |
| hidith A Duyn, Ph.D/N.T.                      | Jud. th A. Dwyer, Ph.D. Executive Vice President   | 1/2/03      |

This report is required by law (7 USC 2143). Failure to report according to the regulations can result in an order to cease and desist and to be subject to penalties as provided for in Section 2150 See reverse side for additional information Interagency Report Control No 0180-DOA-AN

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE 1. REGISTRATION NO 047 775

FORM APPROVED OMB NO 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)

2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA <sup>incluite Zip College</sup> Olaf College

1520 St. Olaf Avenue P. O. Box 1097

Northfield, MN 55057-1098 Status: Active

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, teaching, or experimentation, or held for these purposes. Attach additional

**FACILITY LOCATIONS (Sites)** 

Bollond Hall Prucholey & Dept.

Science Center, Biology, Dent.

| Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes. | C Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used. | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to this report). | F.  TOTAL NO OF ANIMALS  (Cols. C + D + E) |
|---|---|--|---|---|--|
| 4. Dogs   |   |  |   |   |  |
| 5. Cats   |   |  |   |   |  |
| 6. Guinea Pigs  |   |  |   |   |  |
| 7. Hamsters   |   |  |   |   |  |
| 8. Rabbits  |   |  |   |   |  |
| 9. Non-human Primates                                   |   |  |   |   | <u> </u>                                   |
| 10. Sheep   |   |  |   |   | ļ  |
| 11. Pigs  |   |  |   |   |  |
| 12. Other Farm Animals                                  |   |  |   |   |  |
| 13. Other Animals                                       |   |  | ·   |   |  |
| Pissons   |   | 14   |   |   | 14   |
| ASSURANCE STATEMENTS                                    |   |  |   |   |  |

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#### CERTIFICATION BY HEADQUARTES RESEARCH FACILITY OFFICIAL (Chief Executive Officer or Legally Responsible Institutional Official)

I certify that the above is true, correct, and complete (7 U.S.C. Section 2143)

James M. May, Provost and Dean of

DATE SIGNED

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL NAME & TITLE OF C E.O. OR INSTITUTIONAL OFFICIAL (Type or Print) the College

12-17-02

APHIS FORM 7023 (AUG-91)

See attached form for additional information

Interagency Report Control No.:

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

1. CERTIFICATE NUMBER: 41-R-0049
CUSTOMER NUMBER: 794

FORM APPROVED OMB NO. 0579-0036

IMAL AND PLANT HEALTH INSPECTION SERVICE

Minnesota State University Moorhead

Moorhead, MN 56563

Telephone: (218) -236-2573

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

KING HALL - MSKM

FACILITY LOCATIONS (Sites) - See Atached Listing

| REPORT OF ANIMALS                                     | REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )   |   |  |   |  |  |
|---|---|---|--|---|--|--|
| A.  Animals Covered By The Animal Welfare Regulations | B. Number of animals being to bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not ye | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to | F.  TOTAL NUMBER OF ANIMALS  (COLUMNS C+D+E) |  |
| 4. Dogs   |   |   |  |   |  |  |
| 5. Cats   |   |   |  |   |  |  |
| 6. Guinea Pigs  |   |   |  |   |  |  |
| 7. Hamsters   |   |   |  |   |  |  |
| 8. Rabbits  |   | 13  |  |   | 13   |  |
| 9. Non-human Primate                                  |   |   |  |   |  |  |
| 10. Sheep   |   |   |  |   |  |  |
| 11. Pigs  |   |   |  |   |  |  |
| 12. Other Farm Animals                                |   |   |  |   |  |  |
| 13. Other Animals                                     |   |   |  |   |  |  |
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#### ASSURANCE STATEMENTS

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| CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  ( Chief Executive Officer or Legally Responsible Institutional Official ) |   |             |  |  |  |
|---|---|-------------|--|--|--|
| SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL   | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print | DATE SIGNED |  |  |  |
| Ronald in Jeppson   | Ronald M. Jeppson<br>Dean, College of Social/Natural Sciences   | 10-9-0      |  |  |  |

APHIS FORM 7023 ( AUG 91 )

1. CERTIFICATE NUMBER: 41-R-0050 CUSTOMER NUMBER: 797

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)

Advanced Biosurfaces 5909 Baker Road Suite 550 Minnetonka, MN 55345

Telephone: (952) -912-5400

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Atached Listing

| REPORT OF ANIMALS                                     | REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A ) |   |  |   |  |  |  |
|---|---|---|--|---|--|--|--|
| A.  Animals Covered By The Animal Welfare Regulations | B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not ye  | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to | F.  TOTAL NUMBER OF ANIMALS  ( COLUMNS C + D + E ) |  |  |
| 4. Dogs   |   |   |  |   |  |  |  |
| 5. Cats   |   |   |  |   |  |  |  |
| 6. Guinea Pigs  |   |   |  |   |  |  |  |
| 7. Famsters   |   |   |  |   |  |  |  |
| 8. Rabbits  |   |   |  |   |  |  |  |
| 9. Non-human Primate                                  |   |   |  |   |  |  |  |
| 10. Sheep   | 24  | 3   |  |   | 3  |  |  |
| 11. Pigs  |   |   |  |   |  |  |  |
| 12. Other Farm Animals                                |   |   |  |   |  |  |  |
|   |   |   |  |   |  |  |  |
| 13. Other Animals                                     |   |   |  |   |  |  |  |
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#### ASSURANCE:STATEMENTS

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|   | TION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL cutive Officer or Legally Responsible Institutional Official) |         |
|---|---|---------|
| SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print   | DATE SI |
|   | Yeng Song, M.D.<br>Director of Biological Studies   | 12/1    |

(Replaces VS FORM 18-23 (OCT 88), which is obsolete.

APHIS FORM 7023

(AUG 91)

GNED 12/1/200

# Additional Facility Location:

All research animals are housed in the following facility

Battlebrook Farms 30045 136<sup>th</sup> St. Princeton, MN 55371 This report is required by law (7 USC 2143). Failure to report according to the regulations

See attached form for additional information Interagency Report Co

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE 1. CERTIFICATE NUMBER: 41-R-0052

CUSTOMER NUMBER: 1633

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)

Insight Biomed Inc. 710 E. 24th St. Suite L30 Minneapolis, MN 55404

Telephone: (612) -336-5050

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Atached Listing

| REPORT OF ANIMALS                                       | USED BY OR UNDER (   | CONTROL OF RESEAR   | CH FACILITY ( Attach additiona   | al sheets if necessary or use APHIS Form 7023A )  |  |
|---|--|---|--|---|--|
| A.  Animals Covered  By The Animal  Welfare Regulations | B. Number of animals being _ bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not ye | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to | F.  TOTAL NUMBER OF ANIMALS  (COLUMNS C+D+E) |
| 4. Dogs   |  |   |  |   |  |
| 5. Cats   |  |   |  |   |  |
| 6. Guinea Pigs  |  |   |  |   |  |
| 7. Hamsters   |  |   |  |   |  |
| 8. Rabbits  |  |   | 265  |   | 265  |
| 9. Nc₁-human Primate                                    |  |   |  |   |  |
| 10. Sheep   |  |   |  |   |  |
| 11. Pigs  |  |   |  |   |  |
| 12. Other Farm Animals                                  |  |   |  |   |  |
| 13. Other Animals                                       |  |   |  |   |  |
|   |  |   |  |   | ٠  |
|   |  | -   |  |   |  |
|   |  |   |  |   |  |

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CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL (Chief Executive Officer or Legally Responsible Institutional Official)

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print

DATE SIGNED

9.31.02

ROGER R. WILSON, V.P.

See reverse side for additional information. Interagency Report Control No 0180-DOA-AN

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE 1. REGISTRATION NO. 41-R-0055

CUSTOMER NO. 1657

FORM APPROVED OMB NO. 0579-0036

### ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with include Zip Code)

**HUGHES INSTITUTE** 2720 PATTON ROAD ROSEVILLE, MN 55113 (651) 604-9064

NOV 2 0 2002

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, teaching, or experimentation, or held for these purposes. Attach additional sheets if necessary.)

FACILITY LOCATIONS(sites)

See Attached Listing

HUGHES INSTITUTE

Minneapolis Veteran's Administration Leased Space

| A. Animals Covered By The Animal Welfare Regulations : | B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes. | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used. | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to this report) | F. TOTAL NO. OF ANIMALS (Cols. C + D + E) |
|--|---|---|---|--|---|
| 4. Dogs  | 0   | 7   | 0   | C  | 7   |
| 5. Cats  | 0   | 0   | 0   | 0  | O   |
| 6. Guinea Pigs   | 0   | 0   | 0   | 0  | 0   |
| 7. Hamsters  | 0   | O   | 0   | 0  | C   |
| 8. Rabbits   | 0   | 0   | 0   | 0  | 0   |
| 9. Non-Human Primates                                  | С   | 0   | 0   | 0  | 0   |
| 10. Sheep  | 0   | 0   | 0   | 0  | C   |
| 11. Pigs   | 0   | 0   | 0   | 0  | 0   |
| 12. Other Farm Animals                                 | 00  | O   | 0   | 0  | 00  |
| 13. Other Animals                                      | 0   | 0   | 0   | 0  | 0   |
|  |   |   |   |  |   |
| ASSURANCE STATEMENTS                                   | <u></u>   |   |   |  |   |

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during. and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all the exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use

| CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL (Chief Executive Officer or Legally Responsible Institutional official) |  |             |  |  |  |  |
|--|--|-------------|--|--|--|--|
|  | ove is true, correct, and complete (7 U.S.C. Section 2143)       |             |  |  |  |  |
| SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL  | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print) | DATE SIGNED |  |  |  |  |
|  | Alexey Benyumov - Institutional Official                         | 11.18.02    |  |  |  |  |

41 R 55

### **USDA APHIS Site List**

### **Parker Hughes Institute**

2720 Patton Road Roseville, MN 55113 County: Ramsey

Telephone: (651) 604-9064

## Minnesota Veterans Administration [leased space]

Veterinary Medical Unit – 151 One Veterans Dr., Building 49 Minneapolis, MN 55417 County: Hennepin

Interagency Report Cont

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

can

1. CERTIFICATE NUMBER: 41-R-0057

CUSTOMER NUMBER: 1703

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)

Excorp Medical, Inc. 7200 Hudson Blvd. Suite 235 Oakdale, MN 55042

Telephone: (651) -578-7030

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

### FACILITY LOCATIONS (Sites) - See Atached Listing

| REPORT OF ANIMALS                                    | USED BY OR UNDER (   | CONTROL OF RESEAR   | CH FACILITY ( Attach additiona   | al sheets if necessarv or use APHIS Form 7023A 1  |  |
|--|--|---|--|---|--|
| A. Animals Covered By The Animal Welfare Regulations | B. Number of animals being - bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not ye | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to | F.  TOTAL NUMBER OF ANIMALS  ( COLUMNS C + D + E ) |
| 4. Dogs  | 0  | 0   |  | 0   | 0  |
| 5. Cats  | 0  | 0   | 0  | 0   | 0  |
| 6. Guinea Pigs                                       | 0  | 0   | 0  | 0   | 0  |
| 7. Hamsters  | 0  | 0   | C  | O   | 0  |
| 8. Rabbits   | 0  | $\circ$   | 0  | 0   | 0  |
| 9. Non-human Primate                                 | 0  | O   | C  | 0   | 0  |
| 10. Sheep  | 0  | Ö   | 0  | 0   | 0  |
| 11. Pigs   | 0  | 0   | 0  | 0   | 0  |
| 12. Other Farm Animals                               | 0  | 0   | 0  | 0   | 0  |
| 13. Other Animals                                    | 0  | 0   | О  | 0   | O ;  |
|  |  |   |  |   |  |

### ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and

| CERTIFICATION BY HEA      | ADQUARTERS RESEARCH FACILITY OFFICIAL            |
|---------------------------|--|
| ( Chief Executive Officer | r or Legally Responsible Institutional Official) |

DATE SIGNED

Daviel 6 Miller, President, Céo

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

1. CERTIFICATE NUMBER: 41-R-0058
CUSTOMER NUMBER: 1704

FORM APPROVED OMB NO. 0579-0036

River Valley Farms, Inc. 750 Walnut Street

NOV 2 5 2002

P.O.Box 40 Marine On St Croix, MN 55047

Telephone: (651) -433-5965

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS (Sites) - See Atached Listing

| REPORT OF ANIMALS                                     | USED BY OR UNDER   | CONTROL OF RESEAR   | CH FACILITY ( Attach addition:   | al sheets if necessary or use APHIS Form 7023A )  |  |
|---|--|---|--|---|--|
| A.  Animals Covered By The Animal Welfare Regulations | B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not ye | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to | F.  TOTAL NUMBER OF ANIMALS  (COLUMNS C+D+E) |
| 4. Dogs   |  |   | 49   |   | 49   |
| 5. Cats   |  |   |  |   |  |
| 6. Guinea Pigs  |  |   |  |   |  |
| 7. Hamsters   |  |   |  |   |  |
| 8. Rabbits  |  |   |  |   |  |
| 9. Non-human Primate                                  |  |   |  |   |  |
| 10. Sheep   |  |   | 119  |   | 119  |
| 11. Pigs  |  |   | 248  |   | 248  |
| 12. Other Farm Animals                                |  |   |  |   |  |
|   |  |   |  |   |  |
| 13. Other Animals                                     |  |   |  |   |  |
|   |  |   |  |   | ò  |
|   |  |   |  |   | <u> </u>                                     |
|   |  |   |  |   | <u> </u>                                     |

#### ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and

|   | Y HEADQUARTERS RESEARCH FACILITY OFFICIAL Officer or Legally Responsible Institutional Official) |                      |
|---|--|----------------------|
| SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print  Peane Kingston                  | DATE SIGNED 11/18/02 |

#### **APHIS Form 7023 Site List**

The following sites have been reported by the facility.

Registration Number:

41-R-0058

**Customer Number:** 

1704

Facility:

RIVER VALLEY FARMS, INC.

750 WALNUT STREET

**P.O.BOX 40** 

MARINE ON ST CROIX, MN 55047

(651) 433-5965

7) RIVER VALLEY FARMS
750 WALNUT STREET
MARINE ON ST CROIX, MN 55047

2) River Valley Faims 803 Prospect Aue. Osceola, WI 54020

additional information

SEP 1 8 2002 Interagency Report Control No 0180-DOA-AN

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. REGISTRATION NO. 41-R-0059

### ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

CUSTOMER NO. 1725

FORM APPROVED OMB NO. 0579-0036

2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA, include Zip Code)

BECKMAN COULTER, INC. 1000 LAKE HAZELTINE DR CHASKA, MN 55318 (612) 448-4848

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, teaching, or experimentation, or held for these purposes. Attach additional sheets if necessary.)

FACILITY LOCATIONS(sites)

See Attached Listing

8101 Co. Road #15

Maple Plain, MN 55359

| A. Animals Covered By The Animal Welfare Regulations : | B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes. | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analyesic, or tranquilizing drugs were used. | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to this report) | F. TOTAL NO. OF ANIMALS (Cols. C + D + E) |
|--|---|---|---|--|---|
| 4. Dogs  |   |   |   |  |   |
| 5. Cats  |   |   |   |  |   |
| 6. Guinea Pigs   |   |   |   |  |   |
| 7. Hamsters  |   |   |   |  |   |
| 8. Rabbits   |   | 58  |   |  | 58  |
| 9. Non-Human Primates                                  |   |   |   |  | ·   |
| 10. Sheep  |   | 13  |   |  | 13  |
| 11. Pigs   |   |   |   |  |   |
| 12. Other Farm Animals                                 |   |   |   |  |   |
| Horses   |   | 1   |   |  | 1   |
| 13. Other Animals                                      |   |   |   |  |   |
| Burros   | 3   | 8   |   |  | 8   |
| Goats  | 35  | 32  |   |  | ×32                                       |
| ASSURANCE STATEMENTS                                   |   | L   |   |  |   |

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, leaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all the exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

| CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL   |  |             |  |  |  |  |
|--|--|-------------|--|--|--|--|
| (Chief Executive Officer or Legally Responsible Institutional official)  1 Certify that the above is true, correct, and complete (7 U.S.C. Section 2143) |  |             |  |  |  |  |
| SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL  | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print) Richard S. Creager, Ph.D. | DATE SIGNED |  |  |  |  |
| Intell Rea   | Vice President-Director  | 9-16-2002   |  |  |  |  |

**APHIS FORM 7023** 

Replaces VS FORM 18-23 (Oct 88), which is obsolete

**PART 1 - HEADQUARTERS** 

(AUG 91)

See attached form for additional information Interagency Report Control No

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

1. CERTIFICATE NUMBER: 41-R-0060

CUSTOMER NUMBER: 1816

FORM APPROVED OMB NO. 0579-0036

JULIE NETWORTH

Carleton College

508 Simone Court Dept of Psychology Northfield MN 55057 Northfield, MN 55057

Telephone: (507) -646-4372

NOV 29 2002

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Atached Listing

Hulings Hall Rms 19+21 carleton College

| A.  | B. | Number of   | C. | Number of  | D. | Number of animals   | E | Number of animals upon which teaching,  | F.   |
|---|----|---|----|--|----|---|---|---|--|
| Animals Covered<br>By The Animal<br>Welfare Regulations |    | animals being = bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not ye |    | animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. |    | upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a |   | experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to | TOTAL NUMBEI<br>OF ANIMALS<br>( COLUMNS<br>C + D + E ) |
| 4. Dogs   |    |   |    |  |    |   |   |   |  |
| 5. Cats   |    |   |    |  |    |   |   |   |  |
| 6. Guinea Pigs  |    |   |    |  |    |   |   |   |  |
| 7. Hamsters   |    |   |    |  |    |   |   |   |  |
| 8. Rabbits  |    |   |    |  |    |   |   |   |  |
| 9. Non-human Primate                                    |    | 10  |    | 10   |    | 0   |   | 0   | 10   |
| 10. Sheep   |    |   |    |  |    |   |   |   |  |
| I1. Pigs  |    |   |    |  |    |   |   |   |  |
| 12. Other Farm Animals                                  |    |   |    |  |    |   |   |   |  |
| 3. Other Animals  |    |   |    |  |    |   | - |   |  |
|   |    |   |    |  |    |   |   |   | x3   |
|   |    |   |    |  |    |   |   |   |  |
| <del></del>   |    |   |    |  |    |   | 1 |   |  |

#### **ASSURANCE STATEMENTS**

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and

|  | FION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL scutive Officer or Legally Responsible Institutional Official) |             |
|--|--|-------------|
| SIGNATURE OF C.50. OR INSTITUTIONAL OFFICIAL | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print  | DATE SIGNED |
|  | ASSOCIATE DE AL  | 1125/02     |

filie N.

(Replaces VS FORM 18-23 (OCT 88), which is obsolete.

Julie Neiworth, Professor of Psych 11-25-02

See attached form for additional information Interagency Report Control No.

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE 1. CERTIFICATE NUMBER: 41-R-0061

CUSTOMER NUMBER: 15690

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)

Apptec Laboratory Services, Llc 2540 Executive Drive St Paul, MN 55120

Telephone: (999) -999-9999

651-675-2040

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, lesting, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS (Sites) - See Atached Listing

| REPORT OF ANIMALS L                                   | REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )  |   |  |   |  |  |  |
|---|--|---|--|---|--|--|--|
| A.  Animals Covered By The Animal Welfare Regulations | B. Number of animals being = bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not ye | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to | F.  TOTAL NUMBER OF ANIMALS  ( COLUMNS |  |  |
| 4. Dogs   |  |   |  |   |  |  |  |
| 5. Cats   |  |   |  |   |  |  |  |
| 6. Guinea Pigs  |  | 4992  | .30  |   | 4922                                   |  |  |
| 7. Hamsters   |  |   |  | ·   | •                                      |  |  |
| 8. Rabbits  |  | 530   | 144  |   | 644                                    |  |  |
| 9. Non-human Primate                                  |  |   |  |   |  |  |  |
| 10. Sheep   |  |   |  |   |  |  |  |
| 11. Pigs  |  |   |  |   |  |  |  |
| 12. Other Farm Animals                                |  |   |  |   |  |  |  |
| 13. Other Animals                                     |  |   |  | ,   |  |  |  |
|   |  |   |  |   | \$                                     |  |  |
|   |  |   |  |   |  |  |  |
|   |  |   |  |   |  |  |  |

#### ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
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- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and

| CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL                  |
|---|
| ( Chief Executive Officer or Legally Responsible Institutional Official ) |

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL Type or Print ) نیمندارده و حک

DATE SIGNED 11/6/02

APHIS FORM 7023

Interagency Report Control No.

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE 1. CERTIFICATE NUMBER: 41-R-0062

CUSTOMER NUMBER: 16195

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)

**Argosy University-Twin Cities** 5503 Green Valley Dr Bloomington, MN 55437

Telephone: (952) -252-2132

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Atached Listing

| REPORT OF ANIMALS I                                   | JSED BY OR UNDER (   | CONTROL OF RESEAR   | CH FACILITY ( Attach additiona   | al sheets if necessarv or use APHIS Form 7023A )  |  |
|---|--|---|--|---|--|
| A.  Animals Covered By The Animal Welfare Regulations | B. Number of animals being - bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not ye | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to | F.  TOTAL NUMBER OF ANIMALS  (COLUMNS C+D+E) |
| 4. Dogs   |  |   | 123  |   | 123  |
| 5. Cats   |  |   | 64   |   | 64   |
| 6. Guinea Pigs  |  | Ь   |  |   | 6  |
| 7. Hamsters   |  | 0   |  |   | 0  |
| 8. Rabbits  |  |   | 6  |   | 6  |
| 9. Non-human Primate                                  |  | 0   |  |   | O  |
| 10. Sheep   |  | O   |  |   | 0  |
| 11. Pigs  |  | 0   |  |   | O  |
| 12. Other Farm Animals                                |  | 0   |  |   | O  |
| 13. Other Animals                                     |  | 0   |  |   | 0  |
|   |  |   |  |   | ÷  |
|   |  |   |  |   |  |

#### **ASSURANCE STATEMENTS**

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and

|   | CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL ( Chief Executive Officer or Legally Responsible Institutional Official ) |             |
|---|--|-------------|
| SIGNATURE OF CE OF INSTITUTIONAL OFFICIAL | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print) William Cowan, DVM, President                                     | DATE SIGNED |

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